

Staple Issue Slip Here

**BEST AVAILABLE COPY**

POSITION	ID NO.	DATE
CLASSIFIER	34	9/17/96
EXAMINER	111	9-28-96
TYPIST	343	9/30/96
VERIFIER	338	10-2
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

**INDEX OF CLAIMS**

Claim	Date
1	9/17/96
2	9/28/96
3	9/30/96
4	9/30/96
5	9/30/96
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Claim	Date
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**SYMBOLS**

- ✓ ..... Rejected
- = ..... Allowed
- (Through numeral) Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected